



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL OMMISSION

OMB Number:

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Expires:

April 30, 2008

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SEC USE	ONLY
Prefix	Serial
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DATE RECE	EIVED
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Name of Offering (check if this is an a Offering of Limited Liability C		dicate change.)	137	18804
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505	■ Rule 506	Section 4(6)	LOE
Type of Filing: ■ New Filing	Amendment .		· ·	
	A. BASIC IDENT	TIFICATION DATA		
1. Enter the information requested about	t the issuer	1		
Name of Issuer (check if this is a	nn amendment and name has changed, and	l indicate change.)		·
Battery Opportunity Fund, LL	·C			
Address of Executive Offices	(Number and Street, City, S		Telephone Number (Include	ling Area Code)
	nt Company, LLC, 20 William Stro	eet, Suite 200,	781-577-1267	
Wellesley, MA 02481	•			
Address of Principal Business Operations	(Number and Street, City, S	tate, Zip Code)	Telephone Number (Includ	ling Area Code)
(if different from Executive Offices)				
Brief Description of Business:				
Private Investment Vehicle				
Type of Business Organization		· ·	-	PROCESSED
corporation	limited partnership, already formed	d ■ other (please specify)	: Limited Liability Compar	iy TOOLOOLD
business trust	☐ limited partnership, to be formed		-	NOV 0 2 2006
Actual or Estimated Date of Incorporation Jurisdiction of Incorporation or Organization		3 0 ₁ 5 stal Service abbreviation f	■ Actual ☐ Estimated or State:	JHOMSON FINANCIAL
GENERAL INSTRUCTIONS		" -	-	·

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the carlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Lof9

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	■Manager
		_ Denominal Owner	_ DAGGARITE GIRLES		
Full Name (Last name first, Battery Capital Manage	•	LC			
Business or Residence Addr 20 William Street, Suite	ess (Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, O'Connor, John	if individual)		-		
Business or Residence Addr					
			, Suite 200, Wellesley, MA		Consul and/on
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, Frisbie, Richard, D.	,				
Business or Residence Addr c/o Battery Capital Man			Code) <mark>, Suite 200, Wellesley, M</mark> A	<u>02481</u>	
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, Hanson, Chris	if individual)	-			
Business of Residence Addr	•		Code) , Suite 200, Wellesley, M/	. 02/81	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
Full Name (Last name first,	if individual)				Managing Partner
)	ess (Number and	Street, City, State, Zip	Code)		
susiness of Residence Addr					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
		☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner

		,		B. 1	NFORMA	TION A'B	SOUT OF	EERING				
!											Yes	No
							ted investo	rs in this o	ffering?	•••••		•
					under ULG		dividual?				¢	50,000
Z. Wilat	is the min		estinein tii	at will be	accepted to	ioni any m	arviduar:	***************	***************************************	***************************************		30,000
3. Does	the offeri	ng permit j	joint owne	rship of a	single unit	?		***************************************		•••••	Yes ■	No
4. Enter	the infor	mation rec	uested for	each per	son who h	as been or	will be pa	aid or give	n, directly	or indirectly,		
any to	ommissio	n or simila	ar remunei	ration for	solicitation	of purcha	isers in coi	nnection w	ith sales of	f securities in		
										ered with the		
										ns to be listed iker or dealer		
only.	330ciuica ,	persons or	such a of	ORCI OI G	cuici, you	may see re	, tar the 1111	Omation i	or that bro	kei or dealer		
	e (Last na	me first, if	individual	1)								
None	.						t					
		nce Addres	s (Numbe	r and Stree	et, City, St	ate, Zip Co	ode)					
Name of A	Associated	l Broker o	r Dealer									
States in 1	Which Dar	eon Lietad	Une Solie	ited or Int	ands to So	licit Purcha	noerc ¹	•				-
											🗆 All S	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	1 [DE]	[DC]	(FL)	[GA]	— [HI]	[ID]
(KL)	[IN]	[IA]	[KS]	[KY]	[CO] [LA]	[ME]	[DL] [MD]	[MA]	[MI]	[MN]	[MS]	(MO)
(MT)	(NE)	[NV]	[NH]	(LN)	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	(OR)	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	(UT)	(VT)	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	e (Last na	me first, if	individual	l)			`			·		
•												
Business	or Resider	nce Addres	s (Numbe	r and Stree	et, City, St	ate, Zip Co	ode)				<u></u>	
<u></u>	<u> </u>											
Name of	Associated	l Broker o	r Dealer									
States in N	Which Per	son Listed	Has Solic	ited or Int	ends to So	licit Purcha	asers					
								•••••			🗖 All S	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	{GA}	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
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[RI]	(SC)	[3D]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	e (Last nai	me first, if	individual	!)						•		
:												
Business	or Resider	nce Addres	s (Number	r and Stree	et, City, Sta	ate, Zip Co	de)				****	••
1			· ·									· - ···
Name of A	Associated	l Broker o	r Dealer									
						licit Purcha						
(Chec	ck "All Sta	ates" or ch	eck individ	dual States	s)			***************************************		•••••	🗖 All S	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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[MT]	[NE]	[147]	[NH]	[N]]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
(RI)	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate offering Price	Amount Already Sold
		\$ 	\$
	Equity		
		\$ 	\$
	•	\$	\$
		\$	\$
	,,,,,	\$ Indefinite	\$ 0
	Total	§ Indefinite	\$
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	0	\$ 0
	Non-accredited Investors	0	\$ 0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.	• • • • • • • • • • • • • • • • • • •	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1. Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		·
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees		\$ 0
	Printing and Engraving Costs		\$ 0
	Legal Fees		\$ 0
	Accounting Fees		\$ 0
	Engineering Fees		\$ 0
	Sales Commissions (specify finders' fees separately)		\$ 0
	Other Expenses (identify)		\$ 0
	Total		\$ 0
	1		~ ·

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

 b. Enter the difference between the Question 1 and total expenses furnish the "adjusted gross proceeds to the issue." 	ed in response to Part C - Quest				\$	Indefinit
5. Indicate below the amount of the adused for each of the purposes shown estimate and check the box to the left the adjusted gross proceeds to the issue.	n. If the amount for any purpose of the estimate. The total of the	se is not known, furnish payments listed must e	h an			
;	,		-	ments to		
1				ectors & ffiliates		yments To Others
Salaries and fees	•••••		□ \$		□ \$	
Purchase of real estate			□ \$		_ 🗆 \$	
Purchase, rental or leasing an	d installation of machinery a	nd equipment	\$		_ 🗆 \$	
Construction or leasing of pla	int buildings and facilities		□ \$		_ □ \$	
Acquisition of other business this offering that may be used	sed in exchange for the ass	sets or securities of	- ·		_	
another issuer pursuant to a m	•		□ \$ ·		_ 🗆 \$	
Repayment of indebtedness			□ \$.		_ 🗆 💲	
Working capital			5		_ 🗆 💲	·
Other (specify): Portfolio inve			□ \$.		_ • \$	Indefinite
Column Totals			□\$		- \$	Indefinite
						Indofinit
The issuer has duly caused this notice	to be signed by the undersig	SIGNATURE gned duly authorized p				
	D. FEDERAL to be signed by the undersign undertaking by the issuer t	SIGNATURE gned duly authorized p to furnish to the U.S.	person. If Securities	and Exchar	ige Comn	der Rule 505,
The issuer has duly caused this notice the following signature constitutes an written request of its staff, the information	D. FEDERAL to be signed by the undersign undertaking by the issuer t	SIGNATURE gned duly authorized p to furnish to the U.S.	person. If Securities	and Exchar	ige Comn	der Rule 505,
The issuer has duly caused this notice the following signature constitutes an written request of its staff, the informa 502. Issuer (Print or Type) Battery Opportunity Fund, LLC	D. FEDERAL to be signed by the undersign undertaking by the issuer thation furnished by the issuer Signature	ened duly authorized per furnish to the U.S. to any non-accredited	person. If Securities	and Exchar sursuant to pa	nge Comr aragraph (der Rule 505, nission, upon b)(2) of Rule
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